Fill in this info	ormation to iden	tify your case and this filing:	freeze freeze freeze
Debtor 1	Rochelle First Name	Johnson Middle Name I.ast Name	Freeze Lance Court Lance
Debtor 2 (Spouse, if filling)	First Name	Middle Name Last Name	2017 JUL -3 PM 3: 08
United States Bar Case number (if known)	nkruptoy Court for the	S NORTHERN DISTRICT OF OHIO	U.S. RATION OF THE NEW YORK AND THE NEW YOR THE NEW YORK AND THE NEW YORK AND THE NEW YORK AND THE NEW YORK
Official Form Schedule A/i	·		- 12/15
the asset in the ca filing together, bot sheet to this form.	tegory where you the hare equally respo On the top of any a	lescribe items. List an asset only once. If an a sink it fits best. Be as complete and accurate a nsible for supplying correct information. If mo additional pages, write your name and case nu dence, Building, Land, or Other Real I	as possible. If two married people are are space is needed, attach a separate
☐ No. Go to		equitable interest in any residence, building, la	nd, or similar property?
1.1. 2335 Cleveland E Street address, if availal	Blvd ble, or other description	What is the property? Check all that apply. ☑ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the Current value of the
Lorain ^{City} Lorain	OH 44052 State ZIP Code	☐ Investment property ☐ Timeshare	portion you own? \$86,000.00 \$938.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
County 3 Br, 2 Ba, 1540 s	q ft, fplace,	Who has an interest in the property? Check one.	FHA Real Mortgage
bsment,1948 Taxes 2918.26/ ye adjustments-(cre = \$1863.48		✓ Debtor 1 only✓ Debtor 2 only✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Check if this is community property (see instructions)
		Other Information you wish to add abou property identification number: 0300	it this item, such as local 049103010
entries for pag		you own for all of your entries from Part 1, including for Part 1. Write that number here	
		ultable interest in any vehicles, whether they are lease a vehicle, also report it on Schedule G: Exc	
B. Cars, vans, true ☑ No ☐ Yes	cks, tractors, sport	utility vehicles, motorcycles	

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Schedule A/B: Property

Official Form 106A/B

De	btor 1	Rochelle Johnson Case number (if known)	The state of the s
4.		raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories es: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.		dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here	\$0.00
ŀ	ant 3;	Describe Your Personal and Household Items	HEROM (241) OMBH PROSESSION FOR DESCRIPTION OF THE PROSESSION FOR THE PROSESSION OF
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example	old goods and furnishings s: Major appliances, furniture, linens, china, kitchenware	
	⊠ Yes	Describe bedrooms(3), living room, family room, kitchen Furniture for basic living Appliances include Refridgerator, oven, dishwasher, washer, dryer lawnmower Basic goods for small to midsize house with 1 occupant	\$3,500.00
7.	Electroi Example	ics s: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No ☑ Yes	Describe Computer, 3 TV's, Playstation, Wii, Stereo	\$1,200.00
8.		oles of value s: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No ☐ Yes.	Describe	Umaharrayan anno anno 44 MANANA BARBAR B
9.		nt for sports and hobbles s: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No □ Yes.	Describe	MARCHARIOS PARRITANAS A PROSPESSA A PROSPE
10.	Ø No	Describe	
11,		Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes.	Describe Daily Wear	\$350.00
2.	Jewelry Example:	: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No □ Yes.	Describe	

Schedule A/B: Property

De	btor 1	Rochelle Johnson	Case number (if known)	na ann an an an Air ann an Aireann Aighreadh agus agus ann an guidh an an an an an an an an Aireann an Aireann
13.		rm animals les: Dogs, cats, birds, hor	rses	
	☑ No ☐ Yes	s. Describe		
14.	dld not	•	hold items you did not already list, including any health alds you	
		s. Give specific		
15.			our entries from Part 3, Including any entries for pages you have	\$5,050.00
Р	art 4;	Describe Your Fin	nancial Assets	oorden Market (Market) NA 1922 (Market)
		or have any legal or equ	uitable interest in any of the following?	Gurrent value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in yo petition	our wallet, in your home, in a safe deposit box, and on hand when you file your	
	☐ No Yes			\$50.00
17.	•		other financial accounts; certificates of deposit; shares in credit unions, d other similar institutions. If you have multiple accounts with the same	
	☐ No ☑ Yes.		Institution name:	
	17.	1. Checking account:	Checking account- Huntington	\$0.00
	17.2	2. Checking account:	Checking account- PNC	\$0.00
	17.3	3. Savings account:	Savings account- Huntington	\$0.00
18.	Example	mutual funds, or publicly s: Bond funds, investmen	y traded stocks nt accounts with brokerage firms, money market accounts	
	☑ No ☐ Yes.	Institu	ution or issuer name:	
		olicly traded stock and in est in an LLC, partnersh	nterests in incorporated and unincorporated businesses, including ip, and joint venture	
	infor	Give specific mation about	of entity: % of ownership	
	Governn Negotiab	nent and corporate bond le instruments include pe	is and other negotiable and non-negotiable instruments rsonal checks, cashiers' checks, promissory notes, and money orders. ose you cannot transfer to someone by signing or delivering them.	
	Inforr	Give specific mation about lssuer	rname;	

Schedule A/B: Property

De	btor 1	Rochelle John	son	Case number (if known)	erite y met til det til det skrivkladen	men. and, an arrando più la bisimelia ministrati dei balancami mengen MAN di cici ka bisi Nici ka bisimpungan pipelija
21.		nent or pension a les: Interests in IR. profit-sharing p	A, ERISA, Keogh, 401(I	k), 403(b), thrift savings accounts, or other pension or		
		•	Type of account:	Institution name:		
	_			401(k)-Employer and employee both contribute		\$0.00
22.	Your sh Exampl	y deposits and pr are of all unused d es: Agreements wi ies, or others	leposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications		
	☑ No					
	E-e-co-eff	f		titution name or individual:		
23.	V No		a specific periodic payn Issuer name and desc	ment of money to you, either for life or for a number of years))	
24						
44.	26 U.S.	s in an education C. §§ 530(b)(1), 52	9A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuiti	ion prog	ram.
	☑ No ☐ Yes		Institution name and c	description. Separately file the records of any interests. 11 t	U.S.C. §	521(c)
25.	Trusts, powers	equitable or future exercisable for ye	e interests in property our benefit	(other than anything listed in line 1), and rights or		
		Give specific mation about them	1		Ware	
26.	Example No Yes.	copyrights, trade s: Internet domain Give specific mation about them	ı names, websites, proc	and other intellectual property; eeds from royalties and licensing agreements	\$.cc	-
27.	License	s, franchises, and	other general intangit			
	☑ No □ Yes.	s: Duilding permits Give specific nation about them		ooperative association holdings, liquor licenses, professional	l license:	3
Mon	ev or pro	perty owed to you	u?		C.	weart value of the
		party officer to you	••		po Do	urrent value of the ortion you own? ont deduct secured aims or exemptions.
28.	Tax refu	nds owed to you				
	☑ No					
	Yes.	Give specific infor		Fe	deral:	
		them, including wi Iready filed the reti			ate:	
		ne tax years			B-0414	A STATE OF THE STA
				LO	cal:	and the state of the substitute of the state

Dek	otor 1	Rochelle Johnson	Case number (if known)	······································
29.	Family :	support es: Past due or lump sum alimony, spousal support, child support, mainter	nance, divorce settlement, prope	rty settlement
	☑ No ☐ Yes	. Give specific information	Allmony:	SEASON (Anna Anna Anna Anna Anna Anna Anna Ann
			Maintenance:	Grand and an all and the State of State
			Support:	y
			Divorce settlemen	t:
			Property settleme	nt;
30.	Example No	mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sick p compensation, Social Security benefits; unpaid loans you made to som		
	Yes.	Give specific information		
31.	Example	s in insurance policies s: Health, disability, or life insurance; health savings account (HSA); cred	it, homeowner's, or renter's insur	ance
	com	Name the insurance pany of each policy list its value Company name; Be	oneficlary: S	urrender or refund value:
32.	If you are	rest in property that is due you from someone who has died s the beneficiary of a living trust, expect proceeds from a life insurance pol o receive property because someone has died	icy, or are currently	
	☑ No ☐ Yes.	Give specific information		
3 3.	Example	ngainst third parties, whether or not you have filed a lawsuit or made a s: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment	
	☑ No □ Yes.	Describe each claim		General region and act his Michael Mark and Administration advantage region and region a
34.	rights to	ntingent and unliquidated claims of every nature, including countered set off claims	alms of the debtor and	
	☑ No ☐ Yes.	Describe each claim		
35.	Any fina	ncial assets you did not already list		
	☑ No ☐ Yes.	Give specific information		
		dollar value of all of your entries from Part 4, including any entries for for Part 4. Write that number here		\$50.00
Pi	irt 5; D	escribe Any Business-Related Property You Own or Hav	e an Interest In. List any	real estate in Part 1.
37.	Do you o	own or have any legal or equitable interest in any business-related pro	perty?	
	النشا	Go to Part 6. Go to line 38.		

De.	btor 1	Rochelle Johnson	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commissions you already earned	A.	
	☐ Yes ☑ No	. Describe		NAME OF THE PROPERTY OF THE PR
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printere desks, chairs, electronic devices	s, copiers, fax machines, rugs, telephones,	
	☑ No ☐ Yes	. Describe		thurs with the State Sta
40.	Machin	ery, fixtures, equipment, supplies you use in business, a	and tools of your trade	
	☑ No □ Yes	. Describe		beautiful field of the
41.	Invento	ry		
	☑ No ☐ Yes	. Describe		
42.	Interest	s in partnerships or joint ventures		
	☑ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custom	er lists, mailing lists, or other compilations		
	☑ No ☐ Yes	. Do your lists include personally identifiable informatio ☐ No ☐ Yes. Describe	n (as defined in 11 U.S.C. § 101(41A))?	
44.	Any bùs	siness-related property you did not already list		
	☑ No ☐ Yes.	Give specific information.		
45.		dollar value of all of your entries from Part 5, including a for Part 5. Write that number here	* B	
P		Describe Any Farm- and Commercial Fishing-F f you own or have an interest in farmland, list it in l		Interest In.
16.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishing-related property?	
	Saine	Go to Part 7. Go to line 47.		
4 ***	pr	tl.		Current value of the portion you own? Do not deduct secured claims or exemptions.
ŧ7.	Farm an Example	imals s: Livestock, poultry, farm-raised fish		
	☑ No ☐ Yes.	nu.		and a second contract of the c

Schedule A/B: Property

De	btor 1	Rochelle Johnson	Case number (If known)	The state of the s
48		either growing or harvested		
		s. Give specific ormation		
49	. Farm a	and fishing equipment, implements, machinery, fixtu	res, and tools of trade	
	☐ Ye			
50.	Farm a	and fishing supplies, chemicals, and feed		
	☐ Ye			quantities and the second seco
51.	Any fa	rm- and commercial fishing-related property you did	not already list	
		s. Give specific		
52.	Add the	e dollar value of all of your entries from Part 6, inclu ed for Part 6. Write that number here	ding any entries for pages you have	\$0,00
3,4	art 7:	Describe All Property You Own or Have an	Interest in That You Did Not List Above	
53.		have other property of any kind you did not already es: Season tickets, country club membership	list?	
	☑ No □ Yes	. Give specific information.	good	over skelecom pour accessor, pour pois primerous skelecom accessor accessor accessor accessor accessor accessor.
54.	Add the	dollar value of all of your entries from Part 7. Write	that number here	\$0.00
(B)	art 8:	ist the Totals of Each Part of this Form	Energy MANAGEMATICATION AND THE RESIDENCE AND ESCAPABILISTS OF PROPERTY AND	
55.	Part 1:	Fotal real estate, line 2	*	\$938.00
56.	Part 2;	Total vehicles, line 5	\$0.00	
<i>5</i> 7.	Part 3: 1	otal personal and household Items, line 15	\$5,050.00	
58.	Part 4: 1	Cotal financial assets, line 36	\$50.00	
59.	Part 5: 1	otal business-related property, line 45	\$0.00	
60.	Part 6: 1	otal farm- and fishing-related property, line 52	\$0.00	
61.	Part 7: 1	otal other property not listed, line 54	+\$0.00	
62.	Total pe	rsonal property. Add lines 56 through 61	\$5,100,00 Copy personal property total *	\$5,100.00
63.	Total of	all property on Schedule A/B. Add line 55 + line 62	Position	\$6,038.00

Schedule A/B: Property

						\$15 miles
- Fill in this inf	ormation to iden	lify your	ease:			
Debtor 1	Rochelle First Name	Middle Name	Johnsor Last Name	1		The last state of the state of
Debtor 2 (Spouse, If filing)	First Name	Middle Name	. Last Name	interiories e		2017 JUL -3 PM 3: 08
	nkruptcy Court for the:			<u> </u>	0	Check if this is an
Case number (if known)			ACCIDITION OF THE LOCAL PROPERTY OF THE LOCA	un visto de la constitue de la		amender filing
Official Form	<u>106C</u>					A 24. 美型的含品数
Schedule C:	The Property	You CI	alm as Exem _l	ot	CONTRACTOR OF THE STREET OF TH	04/16
Using the property space is needed, fill	you listed on <i>Schedul</i> e	e <i>A/B: Prope</i> s page as m	<i>erty</i> (Official Form 10	6A/B) as your source, list th	esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a specific exempted up to the receive certain because the exemption of 100%	ic dollar amount as e e amount of any appl nefits, and tax-exemp 6 of fair market value	exempt. Alt licable state ot retiremen under a la	ternatively, you may utory limit. Some ex nt fundsmay be uni w that limits the exe	clai cemp imite mpti	m the full fair market otlonssuch as those ed in dollar amount. I	you claim. One way of doing so value of the property being for health alds, rights to lowever, if you claim an lar amount and the value of the le statutory amount.
Part 1; [der	ntlfy the Property	You Cla	lm as Exempt			
1. Which set of e	exemptions are you o	laiming?	Check are only.	9V <i>01</i> 1	if your spouse is filing	with you.
You are c	laiming state and fede laiming federal exemp	ral nonbani	cruptcy exemptions.			,
2. For any prope	orty you list on <i>Sched</i>	<i>tule A/</i> B tha	at you claim as exer	npt, i	fill in the information i	pelow."
Brief description o Schedule A/B that	f the property and lin lists this property		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		ock only one box for h exemption	
			\$938.00		\$0.00 100% of fair market value, up to any applicable statutory Ilmit	Ohio Rev. Code Ann. § 2329.66(A)(1) (a)&(b)
(Subject to adju ☑ No		d every 3 ye	ears after that for case		ed on or after the date o	
T Yes. Did y	ou acquire the proper	ty covered t	by the exemption with	in 1,	215 days before you fil	ea tais case?

17-13105-aih Doc 15 FILED 07/03/17 ENTERED 07/05/17 11:46:07 Page 8 of 29

Schedule C: The Property You Claim as Exempt

Official Form 106C

Debtor 1 Rochelle Johnson		Case numb	er (If known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: bedrooms(3), living room, family room, kitchen Furniture for basic living Appliances include Refridgerator, oven, dishwasher, washer, dryer lawnmower Basic goods for small to midsize house with 1 occupant Line from Schedule A/B: 6	\$3,500.00	\$3,500.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4) (a)
Brief description: Computer, 3 TV's, Playstation, Wil, Stereo Line from Schedule A/B:7	\$1,200,00	100% of fair market value, up to any applicable statutory limit	Ohlo Rev. Gode Ann. § 2329.66(A)(4) (a)
Brief description: Dally Wear Line from Schedule A/B; 11	\$350.00	100% of fall market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329,66(A)(3)
Brief description: Cash Line from <i>Schedule A/B</i> :16	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Gode Ann. § 2329.66(A)(3)
Brief description: Checking account- Huntington Line from <i>Schedule A/B:</i> <u>17.1</u>	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Brief description: Savings account- Huntington Line from Schedule A/B:17.3		\$0.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Brief description; Checking account- PNC Line from Schedule A/B:17.2		\$0.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Brief description: 101(k)-Employer and employee both contribute Line from Schedule A/B; 21	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory	Ohlo Rev. Code Ann. §§ 2329.66(A) (10)(a)

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this inf	formation to id	entify your case			$\frac{\alpha_0}{\epsilon}$	()
Debtor 1	Rochelle First Name	Middle Name	Johnson Last Name			100 (100) 100 (100) 100 (100)
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		2017 11	L 3 PM 3:08
United States Ba	nkruptcy Court for t	he: <u>NORTHERN D</u>	ISTRICT OF OHIO		2017 06	or -0 tu 0.60
Case number (If known)	Name and the State of Adult of Company and American and A				Check (6this)	san g
Official Form	<u>106D</u>					
Schedule D:	Creditors V	/ho Have Cla	ims Secured I	y Property		12/15
correct Informatio On the top of any a 1. Do any credit No. Chec	n. If more space i additional pages, ors have claims s	s needed, copy the write your name and ecured by your proposit this form to the c	Additional Page, fill I case number (If kno perty?	It out, number the ent own).	ally responsible for sup ries, and attach it to th thing else to report on th	is form.
	t All Secured C		and section and a terminate of section and a section a	ell Marx view chius sociation notation de schriste de la consciona de la consc	kecuda baba kilan alikuk adalah da adalah baban baban baban adalah baban adalah baban adalah baban adalah baban	RECONSTRUCTION AND ARROWS AND ARR
claim, list the c creditor has a	creditor separately f particular claim, list ble, list the claims i	litor has more than o for each claim. If mo the other creditors in n alphabetical order	re than one n Part 2. As	Golumn A Amount of claim Do not deduct the Value of collateral	Column B Value of collateral that supports this olaim	Column G Unsecured portion If any
2.1		Describe the secures the c		\$85,062.00	\$938.00	\$84,124.00
Midland Mortgag Creditor's name PO Box 268959 Number Street	je Co	3 Br, 2 Ba, 1 bsment,194	540 sq ft, fplace, 3			
Oklahoma City City Who owes the debt Debtor 1 only Debtor 2 only Debtor 1 and De At least one of ti to a community	ebtor 2 only he debtors and and afm refates	Contingen Unliquidate Disputed Nature of Ilen. An agreem Statutory li	t ad Check all that apply tent you made (such a en (such as tax lien, r lien from a lawsult uding a right to offset)	as mortgage or secured nechanic's lien)		
Date debt was incu	rred <u>4/22/2004</u>	Last 4 digits o	f account number	5 4 2 6		
add Armada Barra (a Caluma A on this		PORTION OF THE STATE OF THE STA	.	

Official Form 106D

all pages. Write that number here:

that number here:

If this is the last page of your form, add the dollar value totals from

Schedule D: Creditors Who Have Claims Secured by Property

page 1

\$85,062.00

\$85,062.00

Debtor 1	Rochelle		<u> Johnson</u>
	First Name	Middle Name	Last Name
Debtor 2			AND REAL PROPERTY OF THE PROPE
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	kruptcy Court for the	NORTHERN D	ISTRICT OF OHIO
Case number			

	Jaco I I India Como Como
	2017 JUL -3 PM 3: 08
П	Check if this is an amended filling

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Debtor 1	Rochelle		Johnson
	First Name	Middle Name	Last Name
Debtor 2	Season and the season	GANALITA EN ALIANA MARIA DE LA CARRA D	HALL SPREAMENT CONTRACTOR OF THE PROPERTY OF T
(Spouse, if filing)	First Name	Middle Name	t.ast Name
United States Bar	nkruptcy Court for the:	NORTHERN D	ISTRICT OF OHIO
Case number			

Fina I I Fina I D

2017 JUL -3 PM 3: 08

☐ Check If this is an amended filling

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
	No No
	Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	No. Go to line 3.
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
	No No
	Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the

person shown in line 2 again as a codebtor only if that person is a guarantor or cosligner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H

Schedule H: Your Codebtors

										$A_{ij} = A_{ij} = A_{ij}$	
	Fill in this inform	ation to i	dentify y	our case:						Fren 1 0 m	
No. Conc.	Deblor 1	Rochelle	DEDUKKA MENDUMBUKATUK	Order Section Contracts of Charles (Co.)	Johnso)n				For Many Com	
		First Name	1	Middle Name	Last Nam	е		Che	ck If th		
	Debtor 2	Maria Ma	P						An ar	his is: mended filling 17 JUL = 3 PM 3: 0	
	(Spouse, if filing)	First Name		viiddle Name	Last Nam					oplement showing postpetition	
	United States Bankru	uptcy Court	for the: N	ORTHERN	DISTRICT OF	<u>OHIO</u>		Lal	chapt	ter 13 income as of the following date:	
	Case number (if known)	Wys. Printers or The Control of C				prosentació			Total Designation des	and the second s	
	fficial Form 10	61		······································	editoriis populationes didirettias acceptores anno establistica acceptores de la companya de la		din kamalanda di		MM /	DD/YYYY ********************************	
	chedule I: You		10							12/15	
enis)				angeneuro anto Militari		over all some	usalka kus	estropolica esta antida és			
ind ab yo	out your spouse. If i ur name and case nu	out your sp more space	ouse. If yo Is needed own). Ans	u are separ , attach a se	ated and your sp parate sheet to t	oouse is	not f	iling with y	ou, do	e is living with you, onot include information dditional pages, write	
1.	Fill in your employ	ment									
	Information. If you have more the	an one			Debtor 1		بند المحمدة الم	proprieta de la constitución de	Deb	ntor 2 or non-filling spouse	
	job, attach a separa with information abo	ite page	Employme	nt status	☑ Employed ☐ Not emplor	ved				Employed Not employed	
	additional employer		Occupatio	n	Corrections (_			keed		
	Include part-time, se or self-employed wo		Employer's	s name	State of Ohio	novem done to be a nanoma of shall make his	MANAGORA (CARA	anno Maria Sarano de V	+ Amerikaanin		
	Occupation may include		Employer's	s address	30 E Broad S	t		and and the second			
	student or homemal applies.	omemaker, ir it			Number Street				Number Street		
	, .				28th Floor		and the second of the second o	Südal/Sülük undı sü ka kiminde keşirili yeriği yeriği veri k	, ,		
					variation and the state of the	taka da da kana ya kana kana ya na gang	+xu-+y	and the second s	d delenantica		
			,		Columbus		ОН	43215-230	l		
					City		State	Zip Code	City	State Zlp Code	
			How long e	employed th	ere? <u>16 yea</u>	rs				Madification to the Material Angular to the property of the common control of the common	
	0:5				-						
		ikkomisenskomisenskomise	CAPATATA CARACTERISTICA CONTRACTOR OF CONTRA	ly Income	KONBOTOTANICO GENORALISMA MARIANA		ansanning t	elene o mesarence per properties	I KONSTRANCO (MA	en e	
	lim <mark>ate monthly incon</mark> a-filing spouse unless			lle this form	. If you have not	ning to r	eport i	for any line,	write \$	50 in the space. Include your	
	~ '	•		one employe	r combine the int	formatio	n for a	II employers	for th	at person on the lines below. If	
	need more space, at				i, combine the in	omado	11 101 0	iii Ompioyore	701 (11	act potation on the united soloti.	
)	For De	btor 1		r Debtor 2 or n-filing spouse	
2.	List monthly gross payroll deductions). would be.	wages, sai If not paid r	ary, and co monthly, cal	mmissions culate what t	(before all the monthly wage	2.	\$	3,207.00		· · · · · · · · · · · · · · · · · · ·	
3.	Estimate and list m	onthly over	time pay.			3. 4	X	\$576.00	•		
١.	Calculate gross inc	ome. Add	line 2 + line	3.		4.	\$:	3,783.00			

Official Form 1061

Schedule I: Your Income

Debt	or 1 Rochelle Johnson	***************************************	Case nun	nber (if known)	The second secon
			For Debtor 1	For Debtor 2 or non-filing spouse	ua.
	Copy line 4 here	4.	\$3,783.00	وسسست بالدار في المراجع والمراجع والمرا	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$458.00	gargeres per a reconstruction of the advanced all the education of	
	5b. Mandatory contributions for retirement plans	бb.	\$0.00	de la reconstitución de la constitución de la const	
	5c. Voluntary contributions for retirement plans	5c.	\$466.00	h	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	V	
	5e. Insurance	5e.	\$229.00	And recorded to the common of	
	5f. Domestic support obligations	5f.	\$0.00	AND AND THE SECTION ASSESSED PARTY OF THE PARTY OF THE SECTION AND THE SECTION ASSESSED.	
	5g. Union dues	5g.	\$47.00	do anticological designation of the second	
	5h. Other deductions. Specify: See continuation sheet	5h.4	\$285.58	Aprenting and the second second distributed the delicated department of the second second	
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,485,58	makad daribbadig-galayopon moon yaa araw waran oo alka daribbididha. I	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,297.42	Andrea de Matalesa de Calabara	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00	Brown A. St. Brown and Strategy and and special and sp	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	gran a norman shadad Maddinininininin kataladaha bila si Garania	
	Include allmony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00		
	8e. Social Security	8e.	\$0.00	Blackinsk skride arbeityngegig hynni namoskumu wan Albermanin di bib di Milleli Mali	
i	Include cash assistance and the value (if known) or any non- cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	wyresterne i mae ar an i mae ar an	
1	Bg. Pension or retirement income	8g.	\$0.00	professing appropriate construction and analysis of the construction of the constructi	
Į	Bh. Other monthly Income. Specify:	8h. +	\$0.00	Carlotte State of the Control of the	
9	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	September 1997 and 19	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,297.42	See a second sec	\$2,297.42
11. :	State all other regular contributions to the expenses that you list in Sc nclude contributions from an unmarried partner, members of your househor riends or relatives.	chedul old, yo	e J. ur dependents, your	roommates, and othe	r
ſ	Do not include any amounts already included in lines 2-10 or amounts that			xpenses listed in Sche	edule J.
8	Specify:		energie is to the energie accessor a label and the the the transfer of the tra	11. +	\$0.00
i	Add the amount in the last column of line 10 to the amount in line 11. ncome. Write that amount on the Summary of Your Assets and Liabilities fit applies.				\$2,297.42 Combined monthly income
13. [Do you expect an increase or decrease within the year after you file th	ils for	n?		
	No. None. Yes. Explain:		20 gpg gr	and the state of t	
		***************************************	podyropolisis se constituti i sussessi anno anno anno anno anno anno anno ann	MANAGAMA (CORP.)	

page 2

Schedule I: Your Income

Official Form 106I

Deb	tor 1	Rochelle Johnson	Case nur	mber (if known)
5h.	Other I	Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse
		emental life insurance	\$27.75	Recommended Control and Additional Additiona
	Suppl	emental Health, Accident	\$39.83	
	Ohio 8	State Tax	\$104.00	
	City T	axes Lorain & Grafton	\$114.00	
			Totales door ro	The second section is a second

	Fill in this inform	ation to identi	fy your case:			Che	ck if this is			and white was a
	Debtor 1	Rochelle First Name	Middle Name	Johns Last Na			An amen	ded fillng ment showing	postpe	Monten D
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me		following	3 expenses a date: 2017,	s of the	' ³ РМ 3:08
	United States Bankr	uptoy Court for the:	NORTHERN DIST	RICT OF	OHIO		MM / DD	/ YYYY _{11.0.16}	(.)	Tax
	Case number (if known)				riq magaza gagasan hang gag			NOA?		
<u>O</u>	fficial Form 10	<u>6J</u>								6 F 20 1998
6000000	chedule J: Yo	STATE OF THE PARTY								12/15
CO	ras complete and ac rrect information. If me and case numbe	more space is ne	e. If two married peop eded, attach another s ver every question.	le are fili heet to ti	ing together, both an his form. On the top	e equa of any	illy respo y addition	nsible for su al pages, wr	ppiying ite you	r -
Ī	Parit 1: Descri	be Your House	hold			NESSERVE NAVISANA	nterathmannarhances	Hindran from vor a grant to the same that th	reaction continues and	Deliveral description of the second section of the section of the second section of the
1.	Is this a joint case	7								
	☐ No ☐ Yes	ebtor 2 liv e in a se . Debtor 2 must file	parate household? • Official Form 106J-2, I	Expenses	for Separate Househ	nold of	Debtor 2.			
2.	Do you have depe	6-6nd	No Yes. Fill out this inform	nation	Dependent's relation			ependent's		dependent
	Do not list Debtor 1 Debtor 2.	and 🚟	for each dependent		Debtor 1 or Debtor	2	a	CONTRACTOR		<u>vith you?</u> No
	Do not state the de	pendents'					andreamontherne and bear	a kalan dika di Sasah kalan di Barkera di Perlambah kembangan seperangan	Januari .	Yes Vo
	names.						and the second second		Seeter S	Yes
						and the second distance of	na fandama kanada k	C. B. C. B. C. B. A. B. A. B.	-	No Yes
					Samuel and the shore the section of the short	ala dikadanan dikansi aks	and the second second second	Smily and made a Composition of the Section Control of the Section C	January	Vo Yes
					NOT THE PROPERTY OF THE PROPER	Market Street Core	Merceronical society society	<u> </u>	Lorard	√o √es
3,	Do your expenses expenses of peopl yourself and your	e other than	☑ No □ Yes						haon 3	
		Side на поменения институторующий при подруждения подруждения под при под при под при под под под под под под Под под под под под под под под под под п	ig Monthly Expens	NAMES OF TAXABLE PARTY.	CONSTITUENT CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR	es anders	HDERFELHER FRANKFRISCH STORE	or for the first the source of	uradio antique (distri	Markania miningan kangan pada kangan kan
to r		of a date after the l	uptcy filing date unles pankruptcy is filed. If							
			government assistand Schedule I: Your Incor				,	Your expens	es	ann an de de la companya de la comp
4.			nses for your residenc ny rent for the ground o				4.	Microsoft and Conference of the Conference of th	nevall Biographic sectors and	\$659,00
	If not included in li		,							
	4a. Real estate tax	(08					4a.	Walter State of the Control of the C		Antoniana makalandaya makalan-pa a kela-a kelara ja
	4b. Property, home	eowner's, or renter's	insurance				4b.	Marin, and A distance and control distance in	A Review (Clark Street COM Server	akaciana kulumondulu Alikikasi kaci ina spanga Libusa propri
	4c. Home mainten	ance, repair, and u	pkeep expenses				40.	America de Michigan de Carlos	and a second second	\$125.00
	4d. Homeowner's	association or cond	ominium dues				4d.			

Official Form 106J

Schedule J: Your Expenses

page 1

- 314

Deb	for 1 Rochelle Johnson	Case number (if known)			
		Your expenses			
5.	Additional mortgage payments for your residence, such as home equity loans	5.	bet and the state of the state		
6.	Utilitles:				
	6a. Electricity, heat, natural gas	6a. \$2	265,00		
	6b. Water, sewer, garbage collection	6b. \$ 1	145.00		
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$2	200,00		
	6d. Other. Specify:	ed.			
	Food and housekeeping supplies		200.00		
8.	Childcare and children's education costs		og de species place de la companyon de la comp		
9.	Glothing, laundry, and dry cleaning	9.	60.00		
10.	Personal care products and services	10	20.00		
11.	Medical and dental expenses	11.	40.00		
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12, \$2	250,00		
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	40.00		
	Charitable contributions and religious donations	14.	with the side of the side of		
15.	Insurance.				
	Do not include insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurance	15a.			
	15b. Health insurance	15b.	OPPARATE MARKET MARKET STORY		
	15c. Vehicle insurance	156. \$	70.00		
	15d. Other insurance. Specify:	15d.	***************************************		
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:				
	Installment or lease payments:	44444444444444444444444444444444444444	rounderster suite de la communicación de la co		
	17a. Car payments for Vehicle 1	17a. \$4	31.00		
	17b. Car payments for Vehicle 2	17b.	and the second s		
	17c. Other, Specify:	17c.			
	17d. Other. Specify:		de la companya de la		
18. `	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	a and a support		
	Other payments you make to support others who do not live with you. Specify:	19.			

Det	otor 1	Rochelle Johnson Ca	ເຮe number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a,	denote the second of the secon
	20b.	Real estate taxes	20b.	Plant Land Accident to the Service with a second materials of the Plant I are to the second materials of the Service and the S
	20c.	Property, homeowner's, or renter's insurance	20c.	nanggi yanggi pangganggan kangganggan sa danggan banggan danggan danggan danggan danggan banggan banggan bangga
	20d.	Maintenance, repair, and upkeep expenses	20d.	Education like in stude states in the Education and the Supplementary and in the Latina and Supplementary and in the Latina and Supplementary and the Latina and Supplementary
	20e.	Homeowner's association or condominium dues	200.	MAAA CIINA MAANA MAA
21.	Other	. Specify:	21. 4	COLUMN TO THE STREET AND
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$2,605.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2,	. 22b.	Sakkituru Sakkat Sirin sid kika yirindah, unga pelanbanjuan pada bah dalam 1884 kahansas sakera
	22c.	Add line 22a and 22b. The result is your monthly expenses.	220.	\$2,605,00
23.	Calcu	late your monthly net income.	E - 13-04-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	Administrative and the second control of the
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$2,297.42
	23b.	Copy your monthly expenses from line 22c above.	23b	\$2,605.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	236.	(\$307.58)
24.	Do you	u expect an increase or decrease in your expenses within the year after you file th	is form?	
		ample, do you expect to finish paying for your car loan within the year or do you expect int to increase or decrease because of a modification to the terms of your mortgage?	your mortgage	
	N M	o. es. Explain here: None,		

Fill in this inf	ormation to id	lentify your case		
Debtor 1	Rochelle		Johnson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	kruptcy Court for	the: NORTHERN C	DISTRICT OF OHIO	
Case number (if known)	Near SECOND CONTRACT IN INCREMENTAL SECOND AND AND AND AND AND AND AND AND AND A		Marie Carlo Ca	

TAGA TOOMS TOOMS TOOMS	
2017 JUL -3 PM 3: 11	
Non Check if this is an amended filing	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pari 4: Give Details About Your Marital Status and Where You Lived Before

1.	What is your current marital status? ☐ Married ☐ Not married
2.	During the last 3 years, have you lived anywhere other than where you live now? ☑ No ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
3.	Within the last 8 years, dld you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	No Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Rochelle Johnson			and the second	Case nur	mber (if known)	antono de del Arbeito (Santono de Congreso e e e e e e e e e e e e e e e e e e
F/s	ırt 2:	Explain the Sources of Y	our Income		<u>reguer versumbatikasi a dapasa sera akon prepara persubbatikasi konferencia ka kanan sera da</u>	CONSISTENCE OF THE SECOND AND A SECOND OF THE SECOND ASSOCIATED AND A SECOND OF THE SE
4.	Fill in th	u have any Income from employme total amount of income you receive filing a joint case and you have i	ved from all jobs and all bus	inesses, including part	t-time activities.	endar years?
	☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross Income (before deductions and exclusions	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions
		ry 1 of the current year until	Wages, commissions, bonuses, tips	\$20,544.00	☐ Wages, commissions, bonuses, tips	the state of the s
	ŕ		Operating a business		☐ Operating a business	
		calendar year:	Wages, commissions, bonuses, tips	\$47,615.00	Wages, commissions, bonuses, tips	Accesses to Additional Medical Medical September of an accessed and additional and additional medical september of a second seco
(Jan	uary 1 to	December 31, <u>2016</u>) YYYY	Operating a business		☐ Operating a business	
		ndar year before that:	Wages, commissions, bonuses, tips	\$44,461.00	Wages, commissions, bonuses, tips	
(Jani	uary 1 to	December 31, <u>2015</u>)	Operating a business		Operating a business	
	Include unempl	receive any other Income during income regardless of whether that oyment; and other public benefit panbling and lottery winnings. If you a	income is taxable. Example yments; pensions; rental inc	s of other income are a ome; interest; dividenc	is; money collected from law	/suits; royaltles;
	List eac	h source and the gross income from	n each source separately. E	o not include income	that you listed in line 4.	
	図 No 口 Yes	s. Fill in the details.				

Debtor 1	Rochelle Johnson		namer na a a na a sa kirin dakishi kimana naka saka saka saka saka saya sa	Case number (if kno	wn)	
Part 3:	List Certain Payments You Ma	ide Before	You Filed for Ba	ınkruptey	essi kirikist veron nevistaansa suvusuun ha maka 22,42900 kii korpinin havoo suurusussa kirikis ka	
6. Are elt	6. Are elther Debtor 1's or Debtor 2's debts primarily consumer debts?					
No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8 "incurred by an individual primarily for a personal, family, or household purpose."					d in 11 U.S.C. § 101(8) as	
	During the 90 days before you filed for	bankruptoy, d	id you pay any credit	or a total of \$6,425*	or more?	
	No. Go to line 7.					
	Yes. List below each creditor to what total amount you paid that creatild support and alimony. A	editor. Do not	include payments for	domestic support of	bligations, such as	
	* Subject to adjustment on 4/01/19 and	l every 3 years	after that for cases	filed on or after the c	late of adjustment.	
☑ Ye	s. Debtor 1 or Debtor 2 or both have pr	imarily consu	ımer debts.			
	During the 90 days before you filed for	bankruptcy, d	id you pay any credit	or a total of \$600 or i	more?	
	No. Go to line 7.					
·	Yes. List below each creditor to wh creditor. Do not include paym Also, do not include payment	nents for dome	stic support obligatio	ons, such as child su	nt you paid that pport and alimony.	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
Midland M			\$1,947.00	\$85,062.00	_ [X] Mortgage	
Po Box 26		April 1 - May 1			Car Credit card	
Number Street Oklahoma City, OK 73126		June 1			Loan repayment Suppliers or vendors Other	
City	State ZIP Code	114			AND	
<i>Insiders</i> corpora agent, I	1 year before you filed for bankruptcy, of include your relatives; any general partner thous of which you are an officer, director, including one for a business you operate as a child support and alimony.	ers; relatives of person in conti	f any general partner rol, or owner of 20%	s; partnerships of wh or more of their votin	nich you are a general partner; ng securities; and any managing	
☑ No ☐ Yes	s. List all payments to an insider.					

Debtor 1	Rochelle Johnson			Case numb	per (if known)	
benefite	8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.					
☑ No ☐ Yes	List all payments that b	enefited an inside	∂ ī.			
Part 4:		eranna en	essions, and Foreci	AND AND THE PARTY OF THE PARTY	erne er badd allerin i Ul British er sen badd allerin sen badd allerin sen badd allerin sen badd allerin sen b	general si de 1805 (de 1816) de 1816 (d
List all s		ersonal injury case	vere you a party in any la es, small claims actions, d			
☐ No ☑ Yes.	Fill in the details.					
Case title		Nature of the o	case	Court or agency	Court or agency Sta	
MSW Capita Johnson	al LLC vs Rochelle	Garnishment Financial Dis	for reconciliation of	Lorain Municipal Court Court Name		Pending
Johnson		Linaireiai Ma	pate	100 West Erle Ave		[7] On appeal
Case number	2016CVF01671			Number Street Lorain, OH 44	052	Concluded
oudo manno	EVIVOVI VIVI	u .		1.00 till 1 0/11 -2-1	West and the second sec	Actual Company Lands
				City	State ZIP C	ode
selzed, c Check al No.	year before you filed for or levied? I that apply and fill in the Go to line 11. Fill in the information be	details below.	as any of your property i	repossessed, fore	closed, garnished, a	ttached,
Land			Describe the property		Date	Value of the property
MSW Capita	[bootino tilo proporty		5/23/2016	\$2,265.00
Creditor's Name	. We have the sour philosophic order than the series of the profession of the board strips, miles define an usual trade has series				Samuel (Bendle (1997) of the object property company and a	A STATE OF THE PROPERTY OF THE
1990 Main S		and the second s	Explain what happened			
	Proparty was reveseed					
Sarasota, FI	. 04200	CHAMBON MONTH COMMON THE STATE OF THE STATE	Property was foreclos			
NA SALAWARA MANAGANA			Property was garnish			
City	State	ZIP Code	Property was attache	d, seized, or levied	l.	

De	btor 1	Rochelle Johnson	Case number (if known)
11		90 days before you filed for bankruptcy, did any creditor, including a b ts from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	☑ No ☐ Yes	s. Fill In the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	図 No □ Yes	;	
8.0	art 5:	List Certain Gifts and Contributions	
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a to	al value of more than \$600 per person?
	☑ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any o	? years before you filed for bankruptcy, did you give any gifts or contril sharity?	outions with a total value of more than \$600
	☑ No ☑ Yes	. Fill in the details for each gift or contribution.	
Þ	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptcy, saster, or gambling?	did you lose anything because of theft, fire,
	☑ No □ Yes.	. Fill in the details.	
P	art 7:	List Certain Payments or Transfers	
16.	anyone	year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy pe	tition?
	M No	any altorneys, bankruptcy petition preparers, or credit counseling agencies i	or services required for your parikruptcy.
		Fill in the details.	
17.	anyone v	year before you filed for bankruptcy, did you or anyone else acting on who promised to help you deal with your creditors or to make payment clude any payment or transfer that you listed on line 16.	
	No No	,	
	Yes.	Fill In the details.	

Deb	otor 1	Rochelle Johnson	Case number (if known)
18.	proper	2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affair	rs?
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	☑ No	s. Fill in the details.	
19.	you are	10 years before you filed for bankruptcy, dld you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	☑ Yes	s. Fill in the details.	
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i , closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	☑ No ☑ Yes	s. Fill in the details.	
21.		now have, or did you have within 1 year before you filed for bankrupto urities, cash, or other valuables?	y, any safe deposit box or other depository
	☑ No ☐ Yes	s. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
		s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.		hold or control any property that someone else owns? Include any proin trust for someone.	operly you borrowed from, are storing for,
	☑ No ☐ Yes	s. Fill in the details.	

Del	otor 1	Rochelle Johnson Case number (if known)
	art 10:	Give Details About Environmental Information
For	the pur	pose of Part 10, the following definitions apply:
	hazardo	mental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of us or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, g statutes or regulations controlling the cleanup of these substances, wastes, or material.
		ans any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites.
		ous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic ce, hazardous material, pollutant, contaminant, or similar item.
Rep	ort all n	otices, releases, and proceedings that you know about, regardless of when they occurred.
24.	Has an law?	y governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental
	☑ No □ Ye	s. Fill in the details.
25.	•	ou notified any governmental unit of any release of hazardous material?
	☑ No	s. Fill in the details.
26.	Have y orders	ou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and
	☑ No Yes	s. Fill in the details.
P	art 11:	Give Details About Your Business or Connections to Any Business
27.	WithIn busine	4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any ss?
	property of the control of the contr	A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation
		None of the above applies. Go to Part 12. s. Check all that apply above and fill in the details below for each business.
28.		2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include ncial institutions, creditors, or other parties.
	☐ No ☐ Yes	s. Fill in the details below.

Official Form 107

Debtor 1	Rochelle Johnson	Case number (if known)
Fairt 12	Sign Below	
that answer property be or both. 1	ers are true and correct. I understand to y fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571.	uncial Affairs and any attachments, and I declare under penalty of perjury hat making a false statement, concealing property, or obtaining money or y case can result in fines up to \$250,000, or imprisonment for up to 20 years,
X /s/Roc	e Johnson, Debtor 1	X Signature of Debtor 2
Date _	06/30/2017	Date
Did you att	tach additional pages to Your Statemen	t of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☑ No ☑ Yes		
Did you pa	y or agree to pay someone who is not a	an attorney to help you fill out bankruptcy forms?
No No		
Yes. N	ame of person	Altach the Bankruptcy Petition Preparer's Notice,
		Declaration, and Signature (Official Form 119).

Fill in this. Debtor 1	information to in Rochelle First Name	dentify your case	Johnson Last Name	form and	ne box only as dire in Form 122A-1S s no presumption of abo	прр:	this
Debtor 2 (Spouse, if filli	ng) First Name	Middle Name	Last Name	of abus	culation to determine if e applies will be made Test Calculation (Offici	under Cha	apter 7
United States Case number (if known)	Bankruptcy Court for	the: NORTHERN D	ISTRICT OF OHIO	3. The Me	ans Test does not appl fied military service but	y now bed	ause
(II KIIOWII)	Source () V v v v v v v v v v v v v v v v v v v		ALAKSISSISSA SELEMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBARAN SAMBAR		this is an amended filli	161	
	1004 1			Lationen	and is an anionada ini	19	
Official For		: Varie Crimant	Mandale Incomo				12/15
Chapter /	Statement of	Your Current	Monthly Income				12/10
Information app are exempted f military service 122A-1Supp) w	olles. On the top of rom a presumption o, complete and file lith this form.	any additional pages of abuse because yo	neet to this form. Include to this form. Include to the case of th	e number (if know nsumer debts or l	m). If you believe that because of qualifying	you	
			BENNIN AND SERVICE CONTRACTOR OF THE SERVICE	iomainiminipulizanya principulitati katalisti katalisti	and the second considerant and the second		yeşen Minasi en Edilakea
		status? Check one o	rrity.				
Linux	arried. Fill out Colu		Donatha B. Oalumana Aland D	liwaa 2 11			
Tourist Control			Il out both Columns A and B				
hand.		-	u. You and your spouse a		J D Book 9 44		
hand			legally separated. Fill out			lhia hav v	(01)
d	eclare under penalty	of perjury that you and	. Fill out Column A, lines 2- d your spouse are legally se that do not include evading	parated under nont	pankruptcy law that app	iles or tha	t you
bankrupto August 31, In the resul	y case. III U.S.C. § If the amount of you t. Do not include an	101(10A). For examp ir monthly income vari vincome amount more	d from all sources, derive le, if you are filing on Septe ed during the 6 months, add than once. For example, if have nothing to report for an	mber 15, the 6-mor the income for all (both spouses own	ith period would be Ma 3 months and divide the the same rental proper	ch 1 throu e total by (3. FIII
				Golümn A Debtor 4	Column B Debtor 2 or non-filling spouse		
	s wages, salary, tips payroll deductions).	s, bonuses, overtime,	and commissions	\$3,705.00		201	
B. Allmony ar if Column E		vments. Do not includ	e payments from a spouse	\$0.00	10 10 10 10 10 10 10 10 10 10 10 10 10 1	7	
expenses of regular con your depen	of you or your depe tributions from an un dents, parents, and r	oommates. Include re		\$0.00		₩ ₩ ₩	Trans.

Chapter 7 Statement of Your Current Monthly Income

Del	otor 1 Rochelle Johnson			- Salah Sala	Case number (if l	known)	
					Column A Debtor 1	Golumn B Debtor 2 or non-filling spous	9 .
5,	Net income from operating a busin	ess, profession, o	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	elikiradi mata mata kan dan dan dan dan dan dan dan dan dan d				
	Ordinary and necessary operating expenses	\$0.00	MARKET MA	Сору	•		
	Net monthly income from a business profession, or farm	\$0.00	The representational devices around become a security of the section of the secti	here 🦠	\$0.00	BURGH HENGSHIPS OF AND	
6.	Net income from rental and other re	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	Buttonia amond adda Jun um Lateria Morbo haide in dur dati dididididi.				V
	Ordinary and necessary operating expenses	\$0.00	whatile Viscolities has becomes colonist process and the surface to the	Сору			
	Net monthly income from rental or other real property	\$0.00	Angle of the second of the sec	here স	\$0.00	Title a rishlarasi dashka kabasa ta shini sa fadibabaya a fire a minifili	
7.	Interest, dividends, and royalties				\$0.00		
8.	Unemployment compensation				\$0.00	Comprehension and the state of	
	Do not enter the amount if you conter benefit under the Social Security Act.	nd that the amount r Instead, list it here	ecelved was a				
	For you	•••••••••••••••••••••••••••••••••••••••	\$0.0	00			
	For your spouse	«!** >: ****	++111+	Made Ser			
9,	Pension or retirement income. Do r was a benefit under the Social Securi		ount received that		\$0.00	# construction in the land to the company of professional and the construction of the	
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorism. separate page and put the total below	received under the war crime, a crime If necessary, list o	Social Security Acagainst humanity,	et			
	Total amounts from separate pages, in	fany.		s-\$4	warpeness and an entire an entire and an entire an entire and an entire and an entire and an entire and an entire		
11.	Calculate your total current monthly Add lines 2 through 10 for each colum Then add the total for Column A to the	nn.			\$3,705.00	uga .	\$3,705.00 Total current monthly Income

		`					
Del	otor 1	Rochelle Johnson		Case number (if known)			
P	art 2:	Determine Whether the Means 1	Test Applies to You				
	are suction		ari ang kang mga kang ang ang ang ang ang ang ang ang ang				
12.	Calcu	late your current monthly income for the ye	ear. Follow these steps:	pallistic distribution conference			
	12a.	Copy your total current monthly income from	line 11				
		Multiply by 12 (the number of months in a year	ar).	X 12			
	12b.	The result is your annual income for this part	of the form.	12b. \$44,460.00			
13.	Calcu	late the median family income that applies	to you. Follow these steps:				
	Fill in	the state in which you live.	Ohio				
	Fill in	the number of people in your household.	1				
		he median family income for your state and s		AND THE PROPERTY OF THE PROPERTY OF			
	To find	l a list of applicable median income amounts, dions for this form. This list may also be avail	go online using the link specifi lable at the bankruptcy clerk's o	ed In the separate ffice.			
14.	How o	to the lines compare?					
	14a.	Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, check be	ox 1, There is no presumption of abuse.			
	14b.	Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	p of page 1, check box 2, <i>The p</i>	presumption of abuse is determined by Form 122A-2.			
P.	irt 3:	Sign Below					
*******	By si	gnjing here, I declare under penalty of perjury	that the information on this stat	ement and in any attachments is true and correct.			
		Rochelle Hohuser					
		/ Rochelle Johnson) ochelle Johnson, Debtor 1	X Signat	ure of Debtor 2			
	D	ale 6/30/2017	Date				
		MM / DD / YYYY	wood	MM / DD / YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.						

If you checked line 14b, fill out Form 122A-2 and file it with this form.